

## **Safety and Risk Management Committee Meeting Minutes August 2007**

**Present:** Tommie Murray, Evette Santamore, Donna Delphia, Debbie Bard, Steve Barden, Sarah Merrill, G. Roberts, B. Wetmore, M. Kuhn, D. Mitchell, P. Kennedy, J. Roggensack

**Absent:** Tom Simpatico, Gwen Lipsey, F. Levine, A. Jerman

**Guests:** None

### **Agenda**

- Follow-up
  - Quantros
  - Safety Audits
  - Thermometer checks
  - Glass in Canteen
  - Gloves
  - Grills
  - Hand Hygiene
  - AED training
  - Membership
- New items
  - Emergency Drills
  - Thermal Cups
  - Quarterly Kitchen inspection results
  - Snow removal plan
  - Steps at Dale exit
  - Lighting on Brooks 1 (nights)

### **Safe Use of Barbeque Grills:**

Gas grills have worked well all summer. No problems noted.

**Action:** Assure each grill is covered and stored for winter

### **Hand Hygiene:**

Ongoing surveys by Safety Officers to assure hand hygiene occur. Safety officers to note if staff performed appropriately, provide feedback to staff

In addition, G. Watson and B. Croteau are now performing unannounced surveys on all units/ all shifts to monitor and educate staff. Preliminary results are very good.

**Action:** Continue surveillance

**Safety Officer Reports:**

Safety Officer Reports are being done on outdated tools.

Action: T. Murray redistribute the audit tool and place date of August 2007 at bottom of pages to assure all staff know the right tool for use.

**Gloves: Complete**

- Latex glove use: All latex gloves removed from patient care units.
- Only 2 types of non-sterile gloves in use.

**Glass window in Canteen cracked: Complete**

- Glass replaced.

**Event Reports: Quantros: T. Murray**

An electronic event reporting system will be available for use by mid-September. David Mitchell has sent all staff a link for training purposes. A certificate can be printed after use to demonstrate training. Each employee should provide the certificate to their manager. All Safety Officers and Managers can help by encouraging all staff to complete the on-line tutorial.

"Quantros" is the name of the company which provides the software. A name for Event Reporting at VSH is needed. The committee discussed a contest for all staff to have a chance to name the system. A prize of a \$50 gift certificate will go to the winner.

Next steps:

- All staff to try the system and print certificate
- Safety Officers to encourage staff to complete the training
- T. Murray to obtain prize for contest.
- S. Merrill / T. Murray to create and distribute flyers about the contest.
- System will "go-live" in mid-September

**Food Safety Audit: D. Bard**

Quarterly inspection by Dept of Health.

- Brooks Rehab: Excellent, no findings
- Brooks 1: A few unlabelled items found in refrigerator as well as a box with patient food in the cabinet. Corrections needed
- Brooks 2: A few unlabelled items, a loose handle on the refrigerator (Work order placed), and the floor near dishwasher is cracked (Needs to be checked and work order placed if needed)
- Therapeutic Activities: A few unlabelled items. Special use being developed by D. Bard / P. Kinner. More info to follow.
- Canteen: Excellent, no findings. New pans and new dishwasher in place.

Pharmacy Audit of refrigerators: J. Roggensack

- Compliance has improved, and results are excellent

**Thermal Coffee Mugs: D. Bard**

A recent event of cracking open a thermal coffee mug and creating a weapon occurred at another Vermont hospital. That hospital visited VSH to see procedures used here to prevent such an occurrence. With all dining being observed, and no thermal mugs allowed except in dining room, the risk at VSH is avoided.

**AED Training: D. Mitchell**

All training for new AEDs is complete for all licensed care providers. AED training is included in:

- Orientation
- Yearly CPR training

Status: Complete

**Emergency Drills: D. Mitchell**

Staff practice performing in emergency procedures is known to improve performance if such an emergency occurs. A test of a Mock Code was performed on Brooks 1 (Thank you to all!) The plan was as follows:

- Mock scenarios were developed by VSH Education Dept. Scenarios include emergencies such as medical emergencies, facility emergencies.
- Evaluation tools have been developed to correspond to the emergency.
- A designated person is assigned to be the evaluator.
- All staff are informed at the beginning of the shift that an emergency drill will occur sometime within the shift. Specifics of types of emergency are not provided
- Staff informs patients that a drill will occur, and that is a practice session only.
- The drill is announced and staff respond as though it were real
- After drill is complete, the evaluator and the staff "de-brief" and identify what went well, what did not, and lessons learned.
- Results of drills will be provided to the Safety Committee

The first drill showed prompt response by all members of the team. Lessons learned included a request for a venti-mask on the cart. The information has been forwarded to the Medical Director.

Discussion by the committee of items required when patient is away from unit. A "backpack" of emergency supplies is located in Admissions. The Committee members were not clear as to whether the contents of the backpack have been updated to reflect recent changes in Emergency Carts.

Action: T. Murray will forward correct list to: J. Roggensack, M. Perry for review and update of backpack. T. Murray will also forward a list of the contents of both Emergency Carts and the "backpack" to all committee members.

The Safety Committee approved moving forward with drills on all units/ all shifts. Results to be provided at next meeting.

**Membership:**

- Need member from Therapeutic Activities.

Action: T. Murray to contact P. Kinner

**Fire Testing:**

- Fire Alarms were tested on all units in July. All results of tests were excellent. Staff actions to prepare for patient safety and possible evacuation were per procedures. Excellent work by all units!!

**Emergency Egress:**

- Dale 2 stairs outdoor step: Now that Dale 2 is being utilized for patient care, a review of egress routes showed a high step at the exit from Dale 2 stairway.

Action: P. Kennedy will report to BGS for solution

Will follow up next meeting

- Snow removal: VSH will ask BGS for a snow removal plan which assures all new and existing emergency egress exits are readily available for use.

Action: P. Kennedy to notify A. Weidman and BGS to provide a plan

Will follow up next meeting

**Lighting: Brooks 1 nights**

B. Wetmore advised the committee that hallway lighting on the Brooks 1 unit is problematic at night. If the lights are off, the corridor is too dark for adequate observation. If the lights are on, the light shines into patient rooms and disturbs sleep.

Action: M. Kuhn to work with BGS, B. Wetmore and A. Weidman to identify options for resolution of the concern.

**Next meeting: September 25<sup>th</sup> 1:00-2:00**